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CONFIRMATION NO. 1037

<b>SERIAL NUMBER</b> 10/509,001	<b>FILING OR 371(c) DATE</b> 09/24/2004 <b>RULE</b>	<b>CLASS</b> 073	<b>GROUP ART UNIT</b> 2856	<b>ATTORNEY DOCKET NO.</b> HKH-07PCT
<b>APPLICANTS</b> Klaus Forstner, Tamm, GERMANY; Bernd Scholler, Karlsruhe, GERMANY;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/DE03/00372 02/08/2003				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 10213592.0 03/27/2002				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 21
				<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Friedrich Kueffner Suite 910 317 Madison Avenue New York ,NY 10017				
<b>TITLE</b> Device and method for measuring constituents in blood				
<b>FILING FEE RECEIVED</b> 469	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	